

GOVERNMENT OF THE DISTRICT OF COLUMBIA TAXICAB COMMISSION

2041 Martin Luther King JR AVE, SE , Room 204

WASHINGTON, DC 20020-7024

(202) 645-6018 Voice (202) 889-3604 FAX

APPLICATION FOR DUPLICATE PUBLIC VEHICLE OPERATOR'S LICENSE ( I D CARD)

Any FALSE OR MISLEADING statement in this application may subject the applicant to the penalty prescribed by law. Detection of such statements may result in the refusal of license, or if granted, revocation of said license. All information MUST be typed or legibly printed.

I hereby make application for the issuance of a DUPLICATE PUBLIC VEHICLE OPERATOR'S LICENSE to replace the original which has been \_\_\_\_\_

\_\_\_\_\_  
(State what happened to your license)

Signature \_\_\_\_\_ Home Telephone Number \_\_\_\_\_

PRINT NAME IN FULL \_\_\_\_\_  
(First) (Middle) (Last)

CURRENT ADDRESS \_\_\_\_\_  
Street Address Apartment #

City State Zip Code  
Type Permit ☐ Taxicab ☐ Limousine ☐ Sightseeing ☐ Funeral Car ☐ Ambulance ☐ Other \_\_\_\_\_

ORIGINAL I.D. CARD NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_ OCCUPATION \_\_\_\_\_

COUNTRY OF BIRTH \_\_\_\_\_ MALE ☐ FEMALE ☐ WEIGHT \_\_\_\_\_ HEIGHT \_\_\_\_\_

COLOR HAIR \_\_\_\_\_ COLOR EYES \_\_\_\_\_ SSN \_\_\_\_\_

OPERATOR PERMIT NUMBER \_\_\_\_\_ STATE \_\_\_\_\_ EXPIRES \_\_\_\_\_

Police Report Number \_\_\_\_\_ Precinct Reported To \_\_\_\_\_ Date Reported \_\_\_\_\_

Officer's Name \_\_\_\_\_ Badge Number \_\_\_\_\_

Applicant personally appeared before me, a notary of the District of Columbia, this \_\_\_\_\_

day of \_\_\_\_\_, the above named applicant who made oath in due form of the law that the above  
(Month) (Year)  
statements are true.

\_\_\_\_\_  
Notary Public

My commission expires \_\_\_\_\_

TO REPORT WASTE, FRAUD, OR ABUSE BY ANY DC GOVERNMENT OFFICE OR OFFICIAL,  
CALL THE DC INSPECTOR GENERAL AT 1-800-521-1639.

NOTICE OF NON-DISCRIMINATION

In accordance with the D.C. Human Rights Act of 1977, as amended, D.C. Official Code § 2-1401-01 et seq., (Act) the District of Columbia does not discriminate on the basis of race, color, religion, national origin, sex (gender or sexual harassment), age, marital status, personal appearance, sexual orientation, familial status, family responsibilities, matriculation, political affiliation, disability, source of income, or place of residence or business. Sexual harassment is a form of sex discrimination which is also prohibited by this Act. Discrimination in violation of the Act will not be tolerated. Violators will be subject to disciplinary action.